

## Editorial

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### PATENT MEDICINES AND INFECTIOUS DISEASES

**A**T a recent meeting of the Ottawa Board of Health, when the question of the epidemic of diphtheria, then prevalent, was being discussed, one of the members of the board drew attention to the fact that a certain medicine called "Diphtherine," which was advertised as a cure for diphtheria, was being widely used. He suggested that in this epidemic it was partly responsible for the wide spread of the disease, four hundred and fourteen cases having occurred in six months. We feel that the point was well taken and that the sale of patent medicines professing to cure infectious diseases should be prohibited by law.

That the use of a patent medicine for the cure of infectious diseases must inevitably result, indirectly, in the spread of the disease cannot be questioned, when one considers the conditions under which this class of secret remedies is used. Recognizing the ease with which the exanthemata are transmitted, we have laws which make it compulsory to notify the public health officials of the existence of all cases of infectious disease in order that they may be quarantined, and the public guarded against their spread. But this duty of notifying the health department of his district of the existence of such disease, falls upon the doctor who discovers it; and the principal value of a patent medicine in the eyes of the ordinary layman lies in the fact that it enables him to dispense with the services of a physician. Is it to be expected that heads of families are sufficiently conversant with these laws to obey them? Even if they are, have they the special knowledge required to recognize these diseases in order to notify the proper authorities of their presence in the community?

Patent medicines are almost invariably cure-alls, and in most civilized countries now, including our own, the government undertakes to exercise some restriction over their indiscriminate sale by demanding that they be registered before they can be put on the market. A formula, giving the exact composition of each remedy, has to be submitted to the proper department, where the medicine is given a serial number and allowed to be sold, if it is found to contain nothing considered deleterious to health. This protects the public in a measure from dangerous drugs being dispensed in a secret nostrum. When, however, the use of such medicines endangers the health of the community at large, it is not enough to ensure that the so-called specific contains only harmless ingredients; the evil effects of its use in defeating the purpose of the laws aiming at the control of infectious disease must be taken into account, and this should be recognized and a licence refused for this reason.

When a patent medicine is used for a non-infectious disease, if it is worthless, as is generally the case, it does not increase the sum total of disease. The victims of misplaced confidence are the individuals who resort to its use and the general public does not suffer. There is then a vast difference between permitting the sale of an ordinary cure-all and a cure for infectious diseases.

That the medicine in question, Diphtherine, is harmless in so far that it contains no poisonous drugs, is evident from the directions given for its use. These state that it is to be used as a gargle only, except in the case of children too young to have learnt this method of cleansing the throat, when a teaspoonful is directed to be given internally every hour. On the other hand, the danger from its use by the public in general is enhanced by the fact that, though one is told how to recognize diphtheria clinically, the individual who has no confidence in his power to do so even with this help, has his difficulties solved by the statement that it is equally efficient and a sure cure for the sore throat of scarlet fever,

measles, whooping cough, croup, and other throat and lung conditions not of an infectious nature.

Can anyone believe that, recognizing the danger from such a course, the authorities would allow to be placed on the market a sure cure for smallpox? Yet these more common and less dreaded forms of the exanthemata kill their thousands to the few that succumb to smallpox.

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### TUBERCULOSIS IN CHILDREN

OF late years the suggestion that pulmonary tuberculosis in adult life is a recrudescence or lighting up, after years of quiescence, of an infection acquired during childhood, has been gaining more adherents. Belief in the possibility of the sudden outbreak of an old acquired focus of disease, years after it had ceased to manifest any clinical evidence of its presence, coupled with the almost universally accepted statement that as many as 90 per cent. of children at the age of puberty were infected with tubercle, tended to give force to this hypothesis. Hence, the recently published statistics of Veeder and Johnston, of St. Louis, which appear in the June number of the *American Journal of Diseases of Children*, are of interest, especially as they show a wide divergence from the results obtained by von Pirquet and Hamburger in Vienna.

The frequency of primary pulmonary tuberculosis in children under five years old has been a much debated question owing mainly to the evidence having to rest upon clinical signs and skiagrams. The presence of tubercle bacilli in the sputum cannot be determined for obvious reasons, and the interpretation of the physical signs and of the Roentgen picture is necessarily biassed by the fixed belief of the observer in the frequency with which this form of tuberculosis occurs in early life. In the diagnosis of doubtful cases one must be able to exclude the more common disease before one can conclude definitely that one is dealing with the less common.